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Frontiers Magazine

University of Tennessee Graduate School of  
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Spring 2009

# Frontiers (Spring 2009) - Beyond These Doors: How An Academic Medical Center Serves Our Community

University of Tennessee Medical Center

University of Tennessee Graduate School of Medicine

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# Frontiers

The University of Tennessee Medical Center and The University of Tennessee Graduate School of Medicine

## Beyond These Doors

How An Academic Medical Center  
Serves Our Community



# The Healing Garden

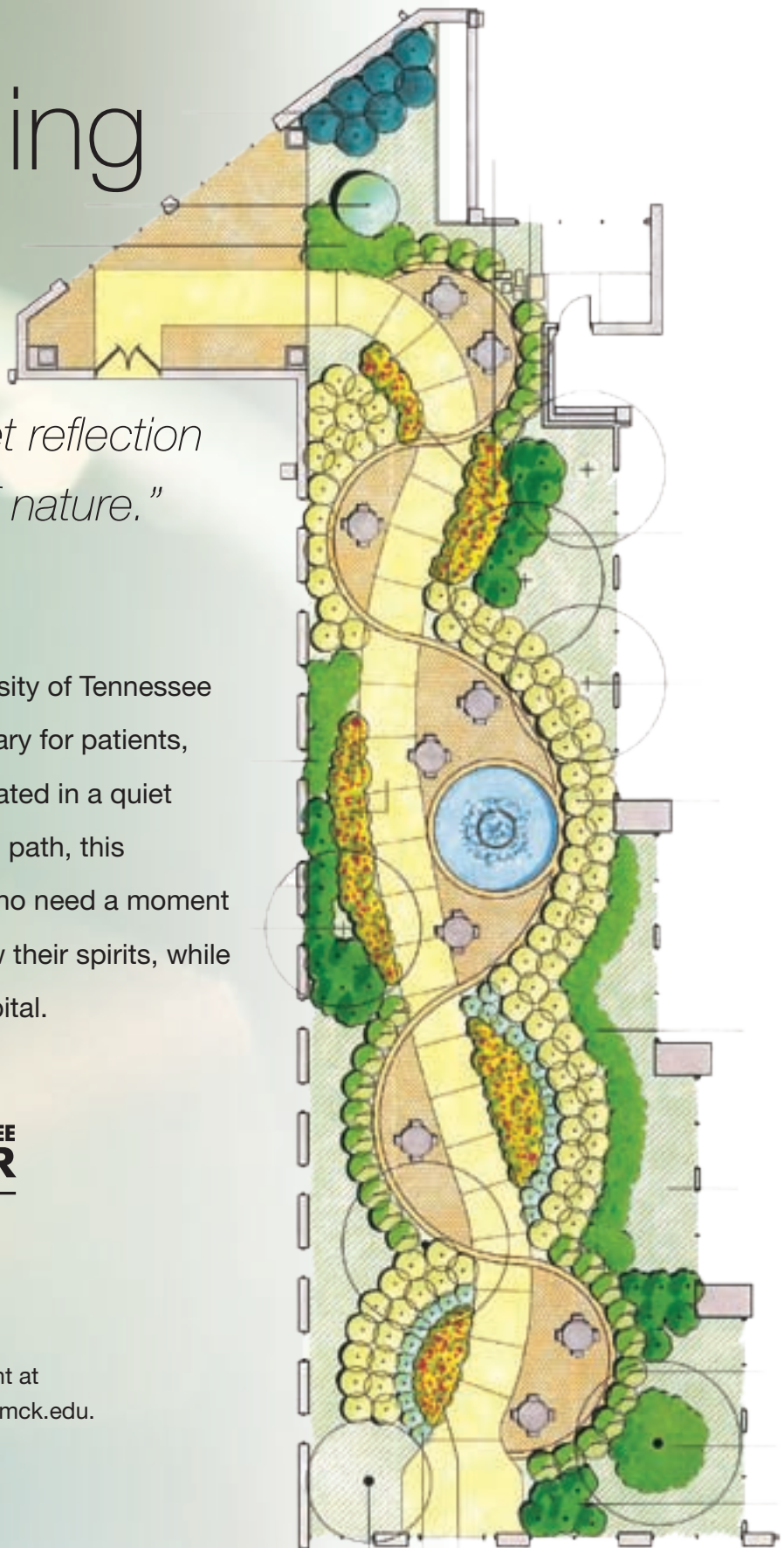
*"The tranquility of quiet reflection  
among the serenity of nature."*

The Healing Garden at The University of Tennessee Medical Center provides a sanctuary for patients, their families, and caregivers. Situated in a quiet courtyard with a designed walking path, this peaceful place is for individuals who need a moment to gather their thoughts and renew their spirits, while not being distanced from the hospital.



Wisdom for Your Life.

For additional information about naming opportunities in the Healing Garden, please contact the Office of Development at 865-305-6611 or email [development@utmck.edu](mailto:development@utmck.edu).







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*The University of Tennessee  
Medical Center and The  
University of Tennessee Graduate  
School of Medicine Frontiers*

Spring 2009

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THE UNIVERSITY of  
**TENNESSEE** **UT**  
GRADUATE SCHOOL  
OF MEDICINE

**UT** THE UNIVERSITY OF TENNESSEE  
**MEDICAL CENTER**

## Dear Alumni and Friends,



For many businesses and organizations, the phrases “community service” and “serving our community” make nice tag-lines in newspaper and radio advertisements or on bumper stickers. But at the University of Tennessee Medical Center, “community service” is a part of everything we do and has been at the heart of our history since we opened our doors in 1956. It truly is a part of our DNA.

Community service takes many forms. It can include health fairs and screenings, breast health outreach programs, a healthy-living kitchen, support for Knoxville Area Project Access, information provided to patients and community members by the Preston Medical Library, training for EMS personnel, and continuing medical education. Beyond these very visible programs, community service extends to the time and talent that members of the University of Tennessee Medical Center team contribute in serving on the boards of church, civic, or youth organizations. They also spend numerous hours volunteering at homeless shelters, building Habitat for Humanity houses, and donating time at other worthy organizations.

Communities are only as strong and vibrant as the businesses and organizations they contain, and businesses and organizations are only as strong as their people. At the University of Tennessee Medical Center, we're blessed in having people who are creative with their ideas and generous with their contributions of talent, time, and dedication. We are proud to highlight the faces and achievements of community service in this issue of *Frontiers*.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Joe R.', written over a horizontal line.

Joseph R. Landsman, Jr.  
President and Chief Executive Officer  
University Health System, Inc.

As an alumnus or friend, you know that the University of Tennessee Medical Center is recognized by our community as a leader in patient care, education, and research. The pages in this issue show that our leadership goes well beyond our local community to affect patients and physicians living beyond our natural borders.

From a public health perspective, our efforts in prevention range from a myriad of screening opportunities to “Cooking Up Something Healthy.” Through our partnerships with community health organizations and others we are able to educate and improve the health of a large number of people.

Our educational efforts, often seen as only within our walls, extend into the region through our individual physicians, such as Dr. John Eaddy, as well as through our excellent resources in the Preston Medical Library. Dr. Scott Stephens, vascular surgery, has taken education to the next level by training physicians across the country in specialized surgical techniques.

Regionally, we reach into the community in several ways through our Fellows in Sports Medicine, Cardiology, Emergency Medicine, and others. These specialized physicians make contributions that affect the lives of many in East Tennessee.

The Graduate School of Medicine, in conjunction with our Medical Center partner, is delighted to make these contributions. Furthermore, we are proud that we employ many people and work with several businesses to have an economic impact on our community, too.

Sincerely,

A handwritten signature in dark ink, appearing to read 'James J. Neutens', written over a horizontal line.

James J. Neutens, PhD  
Dean  
UT Graduate School of Medicine

# SERVING *our Community*

The University of Tennessee Medical Center has a long history of serving our community, which includes a service area extending throughout 21 counties in East Tennessee and portions of Southeast Kentucky, Southwest Virginia, and Western North Carolina. Not only does the medical center provide basic healthcare services to the residents of this region—with 193,411 admissions and visits in 2007—but as the region's only academic medical center, we also provide specialized care not found anywhere else. And through our partnership with the University of Tennessee Graduate School of Medicine, we are able to support medical research and educate the physicians, dentists, nurses, and other allied health professionals of tomorrow.

Since our inception, we have consistently maintained a charitable purpose by providing care to those who don't have the ability to pay. For example, in 2007 the medical center incurred more than \$29 million in uncompensated care. And although we receive reimbursement for services to those who have coverage under TennCare or Medicare, the rate of reimbursement from these programs usually is below the cost of providing the service. We also provide free or discounted care to eligible patients through our charity care program.

In 2007 alone, the academic medical center contributed \$28 million toward preparing the healthcare providers of the future. Providing education and training to future healthcare professionals is a large part of the medical center's mission. In collaboration with UT Graduate School of Medicine and other academic institutions, the medical center serves as a clinical education site devoted to technological and treatment

advances and as well as a sound educational environment. In addition to physician training, other clinical education programs in areas such as pharmacy, nurse anesthesia, clinical pastoral education, and radiography technology are available.


During 2007 and 2008, the UT Graduate School of Medicine educated close to 200 resident physicians and fellows each year, which increases your healthcare team's level of expertise as only an academic medical center environment can do. Furthering this educational goal, during the academic year 2007-2008, we educated 89 medical students, future physicians who will one day impact health care in our region.

Extending our educational efforts to practicing physicians, over the past two years, the Graduate School of Medicine educated more than 3,725 physicians and other health professionals through 19 continuing medical/dental education programs to meet physician re-licensure requirements. Do you know where your physician is gaining his or her re-licensure education? It could be right here at the UT Graduate School of Medicine. Additionally, over the past two years, we assisted more than 750 emergency medical technicians earn required credits to maintain certification in Tennessee.

We hope that through our stewardship and leadership we can positively impact the quality of life for those we serve. In 2007 we provided a community benefit of more than \$43 million. Our commitment to providing excellent healthcare services, health education, research, and training for the practitioners of tomorrow continues to be at the heart of everything we do.







Erin Dean, healthcare coordinator  
discusses the Medical Center's services  
at the Healthy Living Expo.

# Beyond the Doors

## Community Outreach

Since the University of Tennessee Medical Center opened its doors in 1956, we've been dedicated to providing high-quality care to those we serve. And that care happens not just at the medical center but out in the community as well. One of the ways we demonstrate our commitment is in offering free or low-cost health screenings and health education programs to the people of our region.

It's not uncommon for the medical center to participate in community fairs like the Healthy Living Expo and to conduct programs and screenings with our corporate and community partners throughout the year. We're committed to providing preventive health services and promoting personal wellness in our region, and the relationships we have with community organizations and corporate partners offer just the right opportunity.

Our network development department has given more than 20,000 health screenings for corporations and community partners in the past five years alone.

The medical center's team regularly takes wellness initiatives to the workplace, offering on-site services such as flu vaccinations, healthcare coordination, cholesterol screenings, and diabetes education. It also conducts lunch-and-learn sessions that give employees a chance to find out about the latest health topics. "It's our goal to increase the number of people in the community who have access to healthcare and wellness initiatives," says Rhonda McAnally, director of network development.

In addition to that, the medical center works with community organizations



such as the National Kidney Foundation and 100 Black Men of Knoxville on valuable health initiatives like the Kidney Foundation's KEEP screening and the Knoxville 100 Health Expo. Through these partnerships we're able to provide hundreds of free screenings to members of our community who are at increased risk of ailments like kidney disease, stroke, and heart disease. Raising awareness of common health conditions and providing educational information and clinical referrals for any needed follow-up care helps people take charge of their health.

Most of our screening programs have an informational component, but we also offer opportunities that are strictly educational in nature. Our physicians, nurses, and registered dietitians are among the professionals who take to the classroom to give community members a closer look at issues like atrial fibrillation, stroke, and nutrition. In imparting their knowledge, these experts help participants recognize risk factors for disease and make informed healthcare decisions.

Because we know that early disease detection and enhanced knowledge of risk factors save many lives, we hope people will take advantage of the host of services we offer. Through our community outreach and screening programs, we're working to help strengthen the community and make our region a better, healthier place to live.

*Heather Grieve*



*Rhonda McAnally explains screening results to a participant.*







# *Fostering* BREAST HEALTH

## When Geraldine Newman

went to a women's meeting at her housing complex in Morristown, she didn't know it would quite possibly save her life. During that meeting, Newman learned about the Breast Health Outreach Program (BHOP) a part of the University of Tennessee Medical Center's Cancer Institute. Members of the BHOP team were presenting an educational program on breast health, which included instruction in how to perform a breast self exam. They also informed attendees about an upcoming visit to the housing complex by the medical center's mobile mammography unit.

BHOP is designed to provide essential breast health services to women in East Tennessee. It offers free on-site classes at businesses, churches, and other locations in 25 Tennessee counties. The comprehensive classes focus on each person's risk of

breast cancer and on the benefits of early detection by means of breast self-exams, clinical breast exams, and mammography screening. The goal is to provide women with information that empowers them to make informed decisions about their own breast health. Once a BHOP class is completed, the participants have the opportunity to sign up for a mammogram on the medical center's state-of-the-art mobile mammography unit, which has recently been upgraded with digital equipment.

The mobile mammography unit is staffed by a female driver-receptionist and a radiology technologist. It logs thousands of miles annually and provides service six days a week. Geraldine Newman knew it had been several years since her last mammogram and thought the mobile unit's visit to her community was an opportunity she couldn't pass up.

Shortly after she had her mammogram, she received notification indicating that the result was abnormal and additional testing was necessary. She and her late husband, Roy, came from Morristown to





*Peggy Iachetta instructs Donna Callender on proper breast self exams.*

the University Breast Center for a breast ultrasound and biopsy, which showed that she did in fact have cancer. She was referred to Dr. John Bell, a surgical oncologist at the medical center. “He really calmed my fears and explained everything to me so clearly,” says Newman. “After my surgery to remove the lump and some lymph nodes, I had several weeks of radiation and took medication for five years. Now I’m cancer-free.”

“Cancer-free” is a phrase the BHOP team loves to hear. Assistant coordinator Peggy Iachetta says, “We work hard to educate women about the importance of early detection, and it’s exciting to see the impact this program has had on so many lives.” Almost 20,000 women have been taught to take charge of their breast health by the BHOP team since its inception in 1996. And that’s 20,000 women who know the importance of early detection and realize that breast

exams and mammography screening can save lives.

Because Newman’s cancer was caught early, she’s been able to continue her job as a foster grandparent at the Douglas Cherokee Head Start program and to enjoy her three children, six grandchildren, and one great-grandchild. “If it weren’t for the BHOP program,” she says cheerfully, “I might not be alive today.”

*Heather Grieve*



*Geraldine Newman works as a foster grandparent at Douglas Cherokee Headstart in Morristown.*

## Check to See if You Are at Risk for Breast Cancer:

- ☐ I am a woman.
- ☐ I am over 50 years old.
- ☐ I have had a previous breast cancer or precancerous condition.
- ☐ I have a close blood relative with breast and /or ovarian cancer.
- ☐ I had chest area radiation between the ages of 10 and 30.
- ☐ I started my menstrual periods before age 12 or reached menopause after age 50.
- ☐ I never had children or had my first child after age 30.
- ☐ I am overweight.
- ☐ I have used hormone replacement therapy for 5 years or more.
- ☐ I have one or more drinks of alcohol a day.

The more boxes you have checked, the greater your risk of developing breast cancer. Discuss these and any other risk factors with your healthcare professional.



# Cooking Up Something Healthy



**It's not uncommon** to encounter wonderful aromas floating through the halls of the University of Tennessee Medical Center's Heart Lung Vascular Institute. Those smells signal that the members of a Healthy Living Kitchen cooking class are busy learning techniques for making heart-healthy yet flavorful food.

The Healthy Living Kitchen, presented by the Heart Lung Vascular Institute and Kroger, regularly offers cooking classes focused on such topics as healthful grilling, Mediterranean flavors, and holiday entertaining. The medical center's Volunteer Auxiliary made the Healthy Living Kitchen possible by donating the funds needed to buy equipment and supplies for a demonstration kitchen. Executive chef Mark McKinney; cardiac nurse specialist Jane Kelly, BSN, RN; and dietitian Janet Seiber, RD, create classes that highlight new ideas and culinary techniques. Participants watch cooking demonstrations, enjoy meals and samples, and learn about lowering cholesterol, and preparing food safely.

Jim and Betty Fox enjoy the classes so much that they've been to almost every one. The first class they attended got them thinking about what they ate every day and how those meals could



*Jim and Betty Fox cook  
a healthy meal at home.*



be better for them. Jim says they didn't know whether they had the willpower to make healthy changes, but the more they learned in the classes, the easier it was to get excited about cooking and eating healthfully. They've been thrilled with what they've learned so far. "We've brought something back from every class, and we've been able to incorporate what we learned when we cook at home," says Jim.

That's a primary objective of the classes. The Healthy Living Kitchen team uses ingredients available at any grocery store, including or substituting them to make common recipes more healthful yet still tasty and relatively easy to prepare. Participants in the classes are provided with recipes so they can make all the featured meals at home.

Jim says the best thing he's learned from the classes is portion control. "Eating the right amount to be satisfied and not having to feel full is a new concept to me," he says. "I've really learned to enjoy the flavor of foods that are prepared in a healthy manner."

The cooking classes usually follow a theme—such as tailgating, Jim's favorite. Using tents and table decorations, they're designed to be fun as well as educational. "We try to keep the theme relevant to the season or time of year," says Janet Seiber. "For example, we recently held a class with a Valentine's Day theme and taught the benefits of dark chocolate and how to have it in moderation."

Moderation is the key. "We aren't on a diet," Jim says. "We made a lifestyle change by eating proper portions of healthy foods and walking six days a week." In combination, the Foxes have lost almost 100 pounds, but their passion for food hasn't diminished; it has just become healthier. That's what the Healthy Living Kitchen hopes for—that every participant in its classes will develop a passion for healthy cooking.

Heather Grieve



### **Smokey's Chipotle Portobello Sandwich**

Yield: 4

Serving Size: 1 sandwich

- 4 medium Portobello mushrooms
- 4 leaves of green leaf lettuce
- 4 whole wheat sandwich buns
- 2 roasted red peppers, fresh\* or canned
- 12 oz bottle of Mrs. Dash Southwestern Chipotle Marinade
- 1 cup nonfat sour cream

\*Spray whole red pepper with cooking spray and grill until charred. Steam peppers in Ziploc bag for 10 min then remove the skin, seeds and separate into 4 pieces.

Marinate the mushrooms in half of the marinade for 30 mins. Discard used marinade. Grill mushrooms on medium high heat for 3 to 4 mins per side. Mix two tbsp of marinade with sour cream. Layer the buns with one tbsp of the sour cream chipotle sauce, lettuce, grilled Portobello mushroom, roasted red pepper, and one additional tbsp of sauce. Top with the other half of the bun and serve.

Nutrition: Cal 196, Fat 3g, Sat. Fat 1g, Carb 34g, Fiber 6g, Sodium 320 mg.





# BEHIND the scenes



*Tanika M. Pinn, MD, is the 2009 UT Graduate School of Medicine Sports Medicine Fellow. Fellowship Director Kenneth M. Bielak, MD, oversees the sports medicine program and its curriculum.*

## Unique Ways our Academic Medical Center Touches the Community

*You are walking in the mall when a local reporter poses a question to you: "Beyond the walls of the hospital building, can you explain a way an academic medical center impacts our community?"*

*You search the crevices of your mind for at least one response. In a flash of an instant, you are speechless. How does the academic medical center reach into the surrounding area to support its citizens and their activities? In many more ways than you might think. In fact, you may have seen them first-hand.*

Most people know the University of Tennessee Medical Center and UT Graduate School of Medicine work together to provide the region with an academic medical center. Many also know that the academic medical center, with its high-caliber physicians, dentists, and researchers, allows patients access to newly-approved equipment and innovative treatment options. But how many understand its connection with these situations?

- A blocked punt gives the high school home team the field advantage. But now the cheering, over-excited crowd goes suddenly silent as the blocker lies motionless. The academic medical center steps onto the field.
- The orange smile of a UT Lady Vol celebrating her three-point basket beams across your television. The mark of the academic medical center shines through.
- A first-time Knoxville Marathon runner receives first-aid after stumbling in the frenzy of the event start. The academic medical center is on the scene.

### Physician In the Field

Years ago a young girl ran the sidelines of the football field with her dad, a team physician for a local high school team. Her dream? To be a sports-medicine physician.

Today Tanika M. Pinn, MD, is the Department of Family Medicine's 2009 Sports Medicine Fellow. A graduate of Brody School of Medicine at East Carolina University, Dr. Pinn completed her medical residency in family medicine at the University of Michigan. Along the way, she has staffed the training rooms for University of Virginia varsity sports, USA Hockey, and Eastern Michigan University, to name a few.

As part of her fellowship training, Dr. Pinn serves as team physician for Austin-East and Fulton high schools athletic teams. "I enjoy helping adolescent athletes understand how to prevent injuries through exercise and strengthening," she explains. "I also work with their trainers and consult with medical specialists treating their chronic injuries."

Associate professor Kenneth M. Bielak, MD, is the director of the Sports Medicine Fellowship program. "These schools benefit from the watchful, trained eyes of our fellows who are board-certified physicians advancing their skills in the detection and treatment of musculoskeletal injuries encountered in competitive sports," he says. "I wish we could have a fellow on the sidelines for every area team."

### The Big Orange Grin

If you follow women's athletics, you have likely seen the big orange grin. It happens when the orange mouth-guard protecting the teeth and gums of a Lady Vol pops into view. That orange (or blue or orange-and-white) grin is courtesy of the University of Tennessee Medical Center.

Each August the university's female athletes choose their mouth-guard color as UT Graduate School of Medicine Department of Dentistry resident physicians prepare molds and create models of each athlete's teeth.



"The residents not only create the models," says O. Lee Wilson, DMD, director of dentistry's General Practice Residency Program, "they are also responsible for the fabrication and inspection of the guard. It's a great addition to our curriculum, and it benefits the player and university."

## Winning Education

The University of Tennessee Medical Center's personnel assist with many community-wide and regional events each year. From the AAU Junior Olympics to the Susan G. Komen Race, thousands of elite and amateur athletes are assisted by faculty, resident physicians, and fellows serving at community events as medical directors and on-site physicians.

"It's a win-win situation," explains Dr. Bielak. "Our resident physicians and fellows can advance

their skills through real-time exposure to athletic injuries, and the athletes receive immediate, on-site medical care from board-certified physicians honing their skills in our formal training programs."

Other groups, such as Golden Gloves Boxing, Boy Scout Camp Buck Tom, Knoxville Area Project Access, the InterFaith Health Clinic, and the Middle East Tennessee Emergency Response System, also provide opportunities for the center's physicians and dentists to expand their already vast medical knowledge in exchange for providing medical expertise.

By expanding its educational curricula to off-campus sites, the academic medical center enriches the community and region in many, many ways. Perhaps the initial response to the reporter's question about the community impact of an academic medical center should be a question: "How much time do I have?"

Lea Anne Law

*Austin-East player Brandon Lopez gets help from trainer Jayson Berlin and Dr. Tanika M. Pinn, UT Graduate School of Medicine current Sports Medicine Fellow.*



# PRESTON MEDICAL LIBRARY

Impacts  
Libraries,  
Families &  
Rural Doctors







*Blount County Library reference assistant, Linda Kirby, assists Joshua Widener in his search for health information.*

## Using the Web to search for health information

can provide millions of results, good and bad, and finding quality health information can be overwhelming.

As director of University of Tennessee Graduate School of Medicine's Preston Medical Library and Learning Resource Center, a nationally recognized consumer health library, Sandy Oelschlegel, MLIS, saw two needs she could fill.

"Public libraries and their Internet connections are often the first sources of information for families seeking health information, so librarians need to be better equipped to help their patrons," Oelschlegel says. "Also, physicians who are affiliated with academic medical centers like the University of Tennessee Medical Center have the benefit of a medical library in

their facility. However, rural physicians don't have this convenience but still need to be able to access the latest health information."

Oelschlegel wanted to use the library's resources to help families in Tennessee access quality health information online through their local libraries and to provide rural physicians with access to the same online health information urban physicians can get from medical libraries.

Through two grants from the U.S. National Library of Medicine's National Network of Libraries of Medicine, Southeast Atlantic Region, Preston Medical Library received funding for these outreach initiatives.

In November 2008, a team of library professionals from Preston Medical

Library, including Martha Earl, assistant director, and Cynthia Vaughn, clinical information librarian, initiated a training program to teach Tennessee librarians in the Blue Grass, Fort Loudoun and Highland Rim library regions how to find health information on the Internet from trustworthy sources.

Earl says, "Since Preston Library has a long history of providing consumer health information to the public, this outreach takes our mission one step closer to the small-town librarian who has direct one-to-one contact with consumers in underserved counties." Librarians are already using their training to benefit their communities.

"Prior to the training, library staff felt uncomfortable dealing with medical questions because they weren't trained in the medical field," says Lynette



Sloan, director of the Fort Loudoun library region and a program participant. “We now understand that we can guide people to authoritative, quality consumer medical information.

On a personal level,” she adds, “although I have received excellent medical care from the physicians and hospitals in East Tennessee, I, like most of the general public, sometimes have problems understanding the medical terminology that physicians use. My new skills allow me to seek a deeper and better understanding of my health conditions and prospects.”

The initiatives will also fund training and access to the full text of healthcare articles for physicians in Tennessee who aren't affiliated with universities or hospitals that provide library services, especially physicians located in rural areas. Preston Medical Library is partnering with the Tennessee

Medical Association and six participating medical libraries across the state to provide these resources for physicians.

The Preston Medical Library is no stranger to helping physicians and consumers find reliable health information. In addition to providing on-site medical information to physicians and other professionals, Preston Medical Library at UT Graduate School of Medicine has provided the Consumer and Patient Health Information Service for 20 years. The program has helped thousands of patients and consumers receive health information free of charge in order to conduct more productive conversations with their physicians. Anyone wanting medical information may contact the Consumer and Patient Health Information Service at 865-305-9525.

*Kandi Hodges and Amanda Johnson*

## **The Impact of Philanthropy at the Preston Medical Library**

Since 2003 the Preston Medical Library has received many donations. These important resources have been used to support a variety of programs that aid healthcare providers throughout the East Tennessee region, along with patient and community members looking for current health information. The library also serves a more traditional clientele of resident physicians, pharmacy students, faculty members and physicians. Here are some examples of how philanthropic support has assisted Preston Medical Library in its mission to provide accurate and concise medical information.

- Brochures to promote the Consumer & Patient Health Information Services
- Eight new computers for the public reference area
- Upgrade of multi-media equipment in the conference room and the computer training room
- Purchase of clinical information resources, Up-To-Date and MD Consult
- Purchase of DVD review material - MedStudy: Board Review for Internal Medicine and CMEinfo: Surgery Board Review
- Continuing education classes and conference attendance for faculty librarians



# As DOCTOR & Patient

Diabetic Doctor Helps Others  
Learn, Survive, Live Well

## Dr. John Eaddy's family doctor

diagnosed him with diabetes in 1952. He was 12 years old.

"I was told when I was diagnosed that if I lived 20 years, I'd be lucky," Eaddy recently told the Knoxville News Sentinel. At this point, he's lived long enough to be in an elite group: only about 500 of the two million Americans who have Type I (juvenile) diabetes have lived 50 years or more with the disease.

Eaddy has spent his adult life trying to expand that group, initially as a physician and co-founder of University of Tennessee Graduate School of Medicine's diabetes program in 1982. At that time, he and co-founder Dr. William Law Sr. started the Diabetes Center. The staff included nurses, dietitians, physical therapists, social workers, and physicians. Group education classes as well as individual diabetes-management training improved blood-sugar control, reduced hospitalizations, and improved the sense of well being for participants.

In more recent years, having "failed retirement," he has been professor emeritus in the Department of Family Medicine, where he continues to educate resident physicians, faculty, and patients about management of diabetes.

*The lifework of John Eaddy, MD, has been to educate patients and physicians about surviving diabetes. A 57-year survivor of Type I diabetes, himself, Eaddy teaches with a passion. His work has earned him many honors, most recently from the East Tennessee Juvenile Diabetes Research Foundation, which honored him at its Dream Gala fundraiser late last year.*



*"50 Year Survivor Medallion" from Joslin Clinic diabetes: 56 years and counting marriage: 48 years and counting*



Joslin Clinic recognizes 50+ year survivors of diabetes.  
Dr. John Eaddy is center, back row.



John Eaddy's first visit to Seale Harris Diabetes Camp

And starting five years ago, at the age of 65, Eaddy started taking his message to a larger audience. Since 2005, he has led a regional conference to educate physicians and others in how to teach patients to manage their diabetes. So far, more than 250 physicians and other healthcare professionals have listened and learned at the shoulder of this man who practices what he preaches.

It's no coincidence that Eaddy is a 57-year survivor of Type 1 diabetes and is able to effectively teach patients and physicians alike about surviving the disease. He believes in and teaches two rules:

- Diabetes patients must manage their own diabetes, and
- Attitude makes all the difference.

A typical day for Eaddy involves testing his blood sugar six times; eating three healthy meals; giving himself three to six doses of insulin with an insulin pump; exercising by walking, stretching, and doing yard work; as well as getting seven to

eight hours of sleep. "My wife of 48 years is a pro at helping me manage this disease too," he says, "and that kind of support at home is vital to a patient's attitude.

It's still true, as it was in 1950—as it was in 1900—that diet and exercise are the key factors in staying well and minimizing medications and other interventions," the lifelong teacher says.

"Diabetes is a disease that requires daily personal action to live well," he says. "There are people who can't seem to muster that desire and ability. If I can teach them—and show them through my personal experiences—that they can live well with diabetes, I've made a contribution. If I can help other doctors understand how to help their patients, I've done my job."

Always the educator.

Amanda Johnson





# From SURGICAL THEATERS to **satellites**

## Surgeons Share Expertise Across the Hall and Across the Country

*Knowledge is best used when shared. Sometimes the act of sharing is done shoulder to shoulder or in a conference room...or from the other side of the country.*

As director of the Endovascular Surgery program at the University of Tennessee Medical Center and professor of surgery at UT Graduate School of Medicine, Scott Stevens,

MD, teaches our resident and fellow physicians surgery techniques every day. Other surgeons from across the country travel to Knoxville to learn the newest procedures in vascular interventions, training with our endovascular team. Late last year, however, that sharing of knowledge was expanded to an even broader medical community when Stevens and his team performed two vascular surgeries live, via satellite,

viewed by more than 300 surgeons in Phoenix, Arizona.

As part of a national conference called Below the Knee, Stevens demonstrated techniques to remove plaque that clogs blood vessels in patients' legs. Untreated, these patients experience pain, lose mobility, and face possible limb amputation. During the satellite-broadcasted cases, the panel of doctors



in Arizona conversed with Stevens in Knoxville and exchanged tips and strategies about the procedures.

“The dialogue was terrific,” Stevens says. “It’s great for us to be able to pool our thoughts and share our ideas, with the ultimate goal being improved patient care.”

This peer-to-peer format builds a strong community to fight vascular disease.

“Our first goal is preventing the development of this disease,” says Stevens. “Healthy living, including regular exercise, a low-fat diet, and avoiding tobacco, all makes a phenomenal difference.”

Once the disease is severe, however, patients can be treated at the University of Tennessee Medical Center’s top-tier endovascular program by an expert team using premier technology and equipment. A member of this team is Billy Mix, MD, a vascular fellow originally from Georgia. UT Graduate School of Medicine is unique in this region because it offers a Vascular Surgery Fellowship training program. “Every year we hand-pick from the best fellowship applicants across the country. They are the cream of the crop,” says Stevens.

According to Mix, “There is no finer vascular training in the country. The volume and complexity of cases have prepared me well to start my own vascular practice.”

The University of Tennessee Medical Center’s endovascular program is nationally respected for providing



leading-edge technology, training the best vascular resident physicians, and delivering unparalleled patient care. Ultimately, our community benefits from this academic medical center environment, where service is the goal.

But it’s not just our own community that benefits. In the spirit of making a difference in medicine whenever and wherever we can, our physicians take their unmatched expertise to great heights...from surgical theaters to satellites.

*Thanks to East Tennessee Medical News, Meredith Hullette, December 2008, for portions of this article.*

*Amanda Johnson*



# HIGH-RISK REGIONAL PERINATAL PROGRAM

## *Creates Healthy Moms,*

### **Decades of dedication, passion, relationship-building and unselfish service**

to the East Tennessee region are the foundation of the Regional Perinatal Center at the University of Tennessee Medical Center. As the home of one of only five designated regional perinatal centers in Tennessee, the medical center strengthens the community and is people by setting an example of high standards in education and creating improved outcomes for the region's mothers and babies.

The state of Tennessee's regionalization program, begun in 1976, included the establishment of the perinatal center—an individualized program that provides consultation, patient referral, communication, specialized equipment, transport for high-risk patients, in-service and outreach education for caregivers, and site visits to local hospitals. Not only does the

state's designation hold the medical center to a high standard of patient care and services, it also requires that the center maintain relationships with hospitals, educate the community and health professionals, and keep detailed records that track patients throughout their care.

Rita Hillhouse, RN C, director of the perinatal center, has worked at the medical center for 35 years. She has watched the regional and medical center's perinatal programs develop into what it is today: an invaluable resource to health professionals in the entire region as well as the local community.

The program trains nurses and physicians to handle emergencies and identify problems early in a pregnancy. "It's easier to transport a mother prior to delivery than to transport a sick baby," Hillhouse says. "Physicians know they can send their high-risk

pregnancies to the medical center when they need our expertise because we are the only hospital in our area that provides tertiary care to both high-risk mothers and babies."

The perinatal center also reaches out to healthcare providers through physician lectures and hospital visits as well as through its consultative service. Its maternal-fetal-medicine and neonatology doctors readily make themselves available to speak with area physicians when they call. "I'm proud to be a part of this program and to help educate other practitioners," says Dr. Vichien Lorch, a neonatologist. "Throughout my 28 years at the medical center, I've seen our regional perinatal program become one of the largest in Tennessee."

**"Relationships and trust are the key to everything,"** - Rita Hillhouse

"Due in part to ongoing efforts through the regional perinatal program, mothers and babies in East Tennessee continue to have better pregnancy outcomes and lower infant-mortality rates than in many parts of the United States," says Dr. Bobby C. Howard, medical director and maternal-fetal-medicine physician at the perinatal center. "There is still work to be done, so we're implementing strategies ranging from improving preconceptual care to maximizing prenatal care through



*Rita Hillhouse shows the counties served by the Regional Perinatal Program.*

# Healthy Babies

Centering Pregnancy programs to optimizing neonatal care through the Tennessee Initiative for Improving Quality Care.”

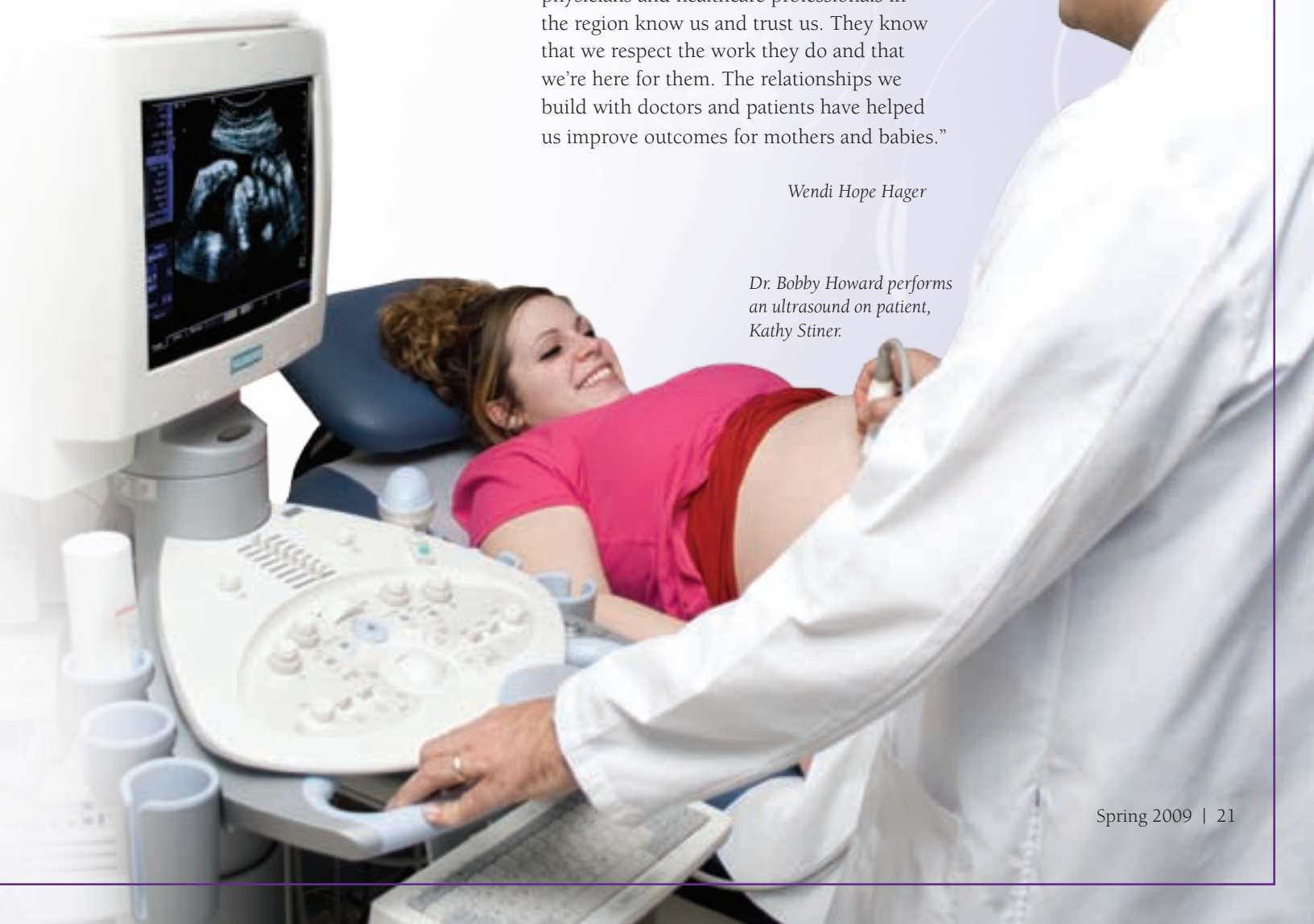
This year the perinatal center received a \$1.8 million grant from the BlueCross BlueShield of Tennessee Health Foundation to develop a telemedicine program that will enable healthcare providers and patients in remote areas to connect with high-risk-pregnancy obstetrical specialists in Knoxville and Chattanooga. This telemedicine project builds upon the success of the medical center’s maternal-fetal medicine consultation model.

The three-year pilot project is designed to demonstrate the usefulness and practicality of telemedicine in serving rural areas. Improved communication among patients, doctors, nurses, and other key healthcare team members is an important step toward reducing premature births and maternal and infant mortality rates. How can this be done? Through long-term, trusting relationships with doctors, nurses, hospitals, and other regional professionals.

“Relationships and trust are the key to everything,” Hillhouse explains. “The regionalization program works well because physicians and healthcare professionals in the region know us and trust us. They know that we respect the work they do and that we’re here for them. The relationships we build with doctors and patients have helped us improve outcomes for mothers and babies.”

*Wendi Hope Hager*

*Dr. Bobby Howard performs an ultrasound on patient, Kathy Stiner.*







# Regional Medical Communications Center

**When there's a disaster in the making**, resources must be rushed to the scene. With lives in the balance, the most critical immediate need is often for information—where is the nearest hospital; where are the nearest ambulances; who has the available beds, ventilators, antibiotics, or other resources that might be needed to deal with the crisis.

The Regional Medical Communication Center (RMCC), staffed and operated by the University of Tennessee Medical Center, serves as the emergency medical information hub for 16 East Tennessee counties. It is one of eight centers in eight regions across the state that support disaster preparedness and day-to-day emergency medical communications.

As a Level I trauma center, the University of Tennessee Medical Center is well suited to offer this particular public service. Its airborne medical emergency transport service, LIFESTAR, which operates the RMCC, has the radio, telephone, and computer

communications infrastructure to make the program work. That was one of the reasons, says LIFESTAR regional operations manager Andrew Slem, that state emergency-preparedness officials chose the medical center to serve as an RMCC. "The majority of the RMCCs are major medical centers that have a flight program in place," Slem says.

Another reason the University of Tennessee Medical Center was chosen was the excellent working relationship that has developed between the center and regional emergency-preparedness officials. "We meet on a regular basis with these folks," says Slem. "There's an open line of communication, and everybody understands their role. Because we do have such a good working relationship, the state often uses our region as a test bed for new scenarios. We average about one disaster exercise a month."

In a real emergency, the RMCC moves swiftly to find ambulances and direct them to the scene, notify hospitals and disaster-management officials at the state and regional levels of what is going on, find the hospitals closest to the disaster scene, ascertain how many

*Andrew Slem, LIFESTAR regional operations manager, in the communications center.*

patients they can handle, and communicate that information to officials managing the transport of patients to treatment centers. The RMCC acts as the focus of information management, pulling in facts and getting them out to people in the field who need them to save lives.

The RMCC also uses Tennessee's Internet-based Hospital Resource Tracking System (HRTS) to identify what patient beds and other resources are available at hospitals in case of an emergency. "That's a really valuable program," Slemple says. "Hospitals update their current bed availabilities

on a daily basis. In an emergency, we 'activate an event' on the HRTS system. Once an event is activated, it opens up the bed availabilities for each of the hospitals and we can see in real time what their resources are, and then in turn we're able to provide that to whoever is working with us on the incident."

Additionally, the RMCC serves as a daily "gatekeeper" managing emergency medical services' use of radio channels to tell Knox County hospital emergency rooms that ambulances are bringing patients in. Because there are more

hospitals in the county than available channels, a gatekeeper is needed to route calls to the best open channel. The RMCC handles more than 100 such radio contacts every 24 hours. In the region's 15 outlying counties, the RMCC is helping set up a radio-frequency network that gives hospitals and emergency medical services access to stronger, more reliable, and more numerous medical channels. "The system isn't complete," says Slemple, "we're about 75% to 80% there, but before this the radio coverage was spotty at best. We've made great strides from where we were."

*John Yates*

*Brian Pratt, LIFESTAR flight coordinator, monitors emergency radio traffic.*







Jeff Thode pictured with “his girls” – from left to right: Bailey, and twins Mackenzie and Madison

## Making **MIGHTY** ends of fragile beginnings

### Sixteen years ago, *Jeff Thode, senior vice president with Wachovia Securities,*

wouldn't have predicted that chairing the University of Tennessee Medical Center's Neonatal Intensive Care Nursery (NICU) capital campaign would have been on his list of “todos.” But the early arrival of his twin girls, Madison and Mackenzie, in 1992 and their month-long stay in the NICU changed all of that.

“That NICU, those nurses and doctors, saved my babies' lives,” says Jeff. “If I can return the favor by leading an effort to raise the money to build them a first-class, state-of-the-art facility, it's the least I can do.”

Jeff has assembled a host of community leaders to help with Phase II of the NICU capital campaign which is being fully funded through philanthropic dollars. To date, Jeff and his team have raised more than \$1.55 of the \$4.8 million needed. Phase I of the campaign was completed

in February of 2007 and when the doors opened, the new facility was praised as much for its aesthetics as it was for its clinical improvements. Costing nearly \$5 million, the project converted over 16,000 square feet of open-bay space into 19 private single bed rooms, and five private twin rooms. In addition 4 “rooming-in” rooms were created which help moms and dads make the transition from hospital room to home.

Phase II facility enhancements to the only private room NICU in East Tennessee will include the addition of 18 private single rooms, four twin rooms, and one triplet room. In addition, the relocation of physician and neonatal sleep rooms, environmental enhancements conducive to optimal health for infants, and the infrastructure to support current and emerging technologies for complex care of at-risk newborns.

“Facility enhancements serve more than just aesthetic purposes. There

is significant clinically-based research which suggests creating certain types of environments for sick and premature infants can have a significant positive impact on their medical outcome thereby giving them the greatest opportunity for a lifetime of optimal health and well-being, notes Dr. Mark Gaylord, neonatologist and physician champion for the campaign. “Research indicates the private room concept brings tremendous benefits to at-risk babies including decreased risk of infection and shorter hospital stays.”

With the completion of Phase II, the NICU at the University of Tennessee Medical Center will not only become a magnet for East Tennessee residents seeking this advanced level of healthcare for their youngest family members, but it will also attract additional topnotch healthcare practitioners seeking an organization willing to provide both the facilities and the programs to support and advance the clinical expertise and experience to the patient's advantage.

# GUARDIAN *Angels*



## *A Rewarding Way to Say “Thank You”*

The University of Tennessee Medical Center and UT Graduate School of Medicine are pleased to recognize the caregivers, physicians, faculty members, and other medical staff who have been acknowledged over the past year through the hospital's Guardian Angel program.



In addition to the kind words, smiles, and letters of thanks so often shared with our caregivers, this program enables patients and their families to say thank you and to honor those individuals who made their experience at the medical center a positive one with a donation to the Guardian Angel program. Honorees receive a custom-crafted lapel pin to wear and are recognized in the medical center's monthly employee newsletter, *Monitor*.

The success of the Guardian Angel program is a clear testament to the genuine care and compassion expressed each and every day for our patients and their families, and is an acknowledgement of the important role our caregivers and facility play in fulfilling our mission of excellence in patient care, education, and research.



“My wife, passed away recently. She always checked on her and came to visit her. She took time to help me and presided over my wife’s memorial service. She is a wonderfully compassionate person.”

“He stayed with my family during our entire time at the hospital. He was wonderful, caring, and very attentive to my family’s needs.”

“For the 5 years we’ve been battling cancer, she has gone out of her way to help us. She came by to visit while in the hospital. She is a wonderful, compassionate person.”

“He never takes credit for what he does. He really is one of God’s true angels. He is my Guardian Angel.”

“She has provided education, information, and resources to my family to help us meet the needs of our 91-year-old mother. Her knowledge and support has helped us during this difficult time.”

“He has gone beyond the norm to help my husband and me.”

“She was so nice and caring and made me feel special at a very important time in our lives.”

“Gave hope in a difficult situation, made arrangements to make things better, and then carried out procedures with competence and caring.”

“In the time of need that we had with our mom, it was great to have her. She is an angel.”

“They all treated me wonderful—they are all true angels.”

“These people not only did their job, they were angels sent from heaven. They were always there for me physically and emotionally.”

## Guardian Angel Recipients As of December 2008

### 3rd Guardian Angel Recognition

Anne Sprouse – Chaplain

### 2nd Guardian Angel Recognition

4 East

Rena Begley – Nurse, 4 South

John Bell, MD – Surgical Oncology, Director of the Cancer Institute

Melanie Boring – Nurse, 12 East

Lisa Caldwell – CNA, 12 East

Rachel Clements – Nurse, NICU

Beth Dowling-Newhart – Nurse, 4 South

Hilary Drews – Case Manager

Mitchell Goldman, MD – Vascular Surgery, Department of Surgery Chair

Mark Hennessy, MD – Maternal-Fetal Medicine

Bobby Howard, MD – Maternal-Fetal Medicine

Joyce Joseph – Nurse, 4 South

Cat Marshall – Nurse, NICU

Vickie Matthews – Manager, Ambulatory Infusion Center

Barbara Munsey – Cancer Institute

William Paulsen, MD – Neurology

Steve Sexton – Chaplain

Teresa Smith – CNA, 4 South

Kerri Thomas – Nurse, NICU

### 1st Guardian Angel Recognition

3 East

4 South

7 East

8 East

12 East

CVICU

Labor and Delivery

MCC

VTSU

Darnella Alexander – CNA, 12 East

Julie Balder – Nurse, 12 East

Heather Barker – Nurse, 11 East

Linda Barnes – Nurse Manager, 12 East

Debbie Barton – Director, Med-Surg Administration

John Basile, DMD – Resident, Oral & Maxillofacial Surgery

AD Baxter – Chaplain

Robert Bertoli, MD – Radiation Oncology

Monte Biggs, MD – Internal Medicine

Gregory Blake, MD – Family Medicine

Penny Blake – Nursing Supervisor

Mary Ellen Bond-Cox – Pharmacist

Ruth Borden – Nurse, University Cancer Specialists

Mary Alice Bozeman – Director, Nursing Risk & Patient Safety

Paul Branca, MD – Pulmonary Disease

Stuart Breese, MD – Cardiology

Christopher Brooks, MD – Emergency Medicine

Mary Lynn Brown – Nurse, CVICU

Jason Bruer – Physical Therapist

Teresa Burns – Nurse, 4 South

Pennie Cable – Assistant Oral & Maxillofacial Surgery

Rhonda Campbell – Special Imaging Technologist, Breast Center

Eric Carlson, DMD, MD – Department of Oral & Maxillofacial Chair

Freida Carroll – Sunshine Industries, Environmental Services

Lorene Carroll – Nurse, 12 East

David Cassada, MD – Vascular Surgery

Bonnie Childers – Nurse, 12 East

Robin Clifton – Operator, PBX & Information

Minnie Cobb – Food Services

Susan Coffin – Nurse, 12 East

Davina Collins – Nurse, 12 East

Eric Cox, MD – Anesthesiology

James Cox, MD – Cardiology

Sandy Craig – Nurse, 12 East

Stephanie Cross, MD – Obstetrics and Gynecology

Joan Daniels-Eskridge – Information Specialist

Erin Dean – Healthcare Coordination

Denise DeHogg – Nurse, 12 East

Susan Dodd, MD – Obstetrics and Gynecology

George Doebler – Chaplain

Robert Elder, MD – Obstetrics and Gynecology, Medical Director of the Center for Women and Children’s Health

Fran Emory – CNA, 4 South

Matthew Everhart – Sunshine Industries, Environmental Services

Peggy Fagan – CNA, 4 South

Nan Farmer – Patient Representative

Linda Faulkner – Nurse, MRI

Daphne Fielder – Nurse, Case Management

Jessica Fischer – Nurse, Emergency Room

Jean Fitzgerald – Nurse Manager, 9 East

Michael Flynn, MD – Anesthesia

Manon Foisy – Nurse Manager, Medical Critical Care

Kimberly Fortner, MD – Obstetrics and Gynecology

Brian Fowler – Nurse, Critical Care Unit

Sherry Fox – Nurse, 4 South

Michael Freeman, MD – Vascular Surgery

Susan Frost – CNA, 12 East

Thomas Gaines, MD – Cardiothoracic Surgery

Susie Godfrey – Nursing Supervisor

Jack Gotcher, DMD, PhD – Oral and Maxillofacial Surgery

Rachel Greene – Development Office

Kay Gritzner – Sunshine Industries, Environmental Services

Becky Hall – Sunshine Industries, Environmental Services

Michelle Harrison – CNA, 5 East

James Hartley – Nurse, CVICU

Angie Herring – Nurse, University Internal Medicine

Trenia Higdon – Nurse Manager, 4 South

Ashley Hill – Nurse, 12 East

Teresa Hill – Clinical Assistant, Oral & Maxillofacial Surgery

Rita Hillhouse – Director, Regional Perinatal Program

Jeffrey Hirsh, MD – Cardiology

Susan Hodges – Nurse, 12 East

JW Hudson, DDS – Oral and Maxillofacial Surgery

Cathery Humphrey – CNA, 8 East

Melanie Hurst – Administrative Specialist Oral & Maxillofacial Surgery

Lori Jenkins – Nurse, 12 East

Douglas Jentilet, MD – Emergency Medicine

Mary Johnson – CNA, 12 East

Mary “TJ” Johnson – CNA, 12 East

Matthew Johnson, DMD – Resident, Oral & Maxillofacial Surgery

Allison Keefer – MRI Patient Clerk

Bernie Kennedy – CNA, 12 East

Cathy Kerby – Magnet Coordinator

Frederick Klein, MD – Urology

Caroline Kreider – CNA, 12 East

Kim Kuwik – Nurse, 10 East

John Lacey, III, MD – Senior Vice President and Chief Medical Officer

Reid Lamson – Sunshine Industries, Environmental Services

Maris Laws – Physical Therapist

Teresa Levey – Vice President, Heart Lung Vascular Institute

Joseph Liu, MD – Cardiology

Ashley Long – CNA, 4 South

Jamie Long – Food Services

Vichien Lorch, MD – Neonatology

Jody Lusby – Nurse, 4 East

Linda Margeson – Nurse, Emergency Room

Kevin Martinolich, MD, FCCP – Pulmonary Disease

Mickey McBride – Coordinator, Performance Improvement

Linda McCollum – Nurse, 12 East

Krystle McGlothlin – Nurse, Labor and Delivery

Edith McKeenhan – Nurse, Labor and Delivery

Thomas Miller, MD – Nephrology

Greer Milstead – Nurse, Labor and Delivery

Gaynell Mischley – Nurse, Emergency Room

Cyndee Molnar-Tilson – Nurse, 4 South

Jonnah Diane Montgomery – Nursing Supervisor

Glenda Moses – CNA, 12 East

Esperanza Muckle – Patient Access Center

Brad Mullins – Respiratory Therapist

Krista Neeley – CNA, 4 South

Cynthia Newton, MD – Internal Medicine

Earleen Nicely – CNA, 12 East

Barbara Murray – Nurse, Labor and Delivery

Mary Nelson, MD – Hospitalist

Todd Nickloes, DO – General Surgery

Robin Norris – Nurse, 7 East

Cheryl Ohnmacht – Nurse, 12 East

Becky Osborne – CNA, 12 East

Teresa Palmer – University Palliative Care

Timothy Panella, MD – Medical Oncology/Hematology, Dept. of Medicine Chair

Donna Patty – Nurse Specialist

Brent Pendergast – Physical Therapist, Rehabilitation Services

Tressa Potter – Medical Assistant, Knoxville Cardiovascular Group

Alice Purser – Nurse, 12 East

Julie Rairigh-Wolfenbarger – Nurse, 7 East

Mark Rasnake, MD – Infectious Disease

Theresa Renfro – Director, Patient Care Finance

Sylvia Rivera – Nurse, 4 South

Denise Rivers, DO – Nephrology

Andrea Robinson – Nurse, 12 East

Ellen Rogers – Nurse, 7 East

Myala Romines – Nursing Supervisor

Steve Ross – Senior Vice President of Strategic Development

Rubinder Ruby, MD – Cardiology Fellow

Murad Salaita, MD – Hospitalist

James Schmid, MD – Neonatology

Betty Schneider – MRI Technologist

Kathleen Schroeder – Nurse, 3 East

Christopher Scott, MD – Cardiology

Paul Serrell, MD – Nephrology

Bernice Sharp – Food Services

Daniel Sherrer, MD – Anesthesiology

Carolyn Singer – Nurse, 12 East

Steve Simpson – Chaplain

Damon Smith – Sunshine Industries, Environmental Services

Dustin Smith, MD – Surgery Resident

Lynnette Smith – Nurse, Labor and Delivery

Russell Smith, MD – Infectious Disease

Angela Stayton – Nurse, 12 East

James Taylor, MD – Plastic Surgery

Rose Thompson – Case Manager

Stacey Thompson – Nurse, 4 South

Carol Tindell – Case Manager

Jill Tipton – Sunshine Industries, Environmental Services

Mary Turbyfill – Nurse, 10 East

Byron Turkett – Physician Assistant

Tani Vince – Nurse, 6 East

Tani Vincent – Nurse, 12 East

Matthew Wade, MD – Resident, Internal Medicine

Sandy Webb – Nurse Manager CVICU

Stephanie Weber – Nurse, Surgical Critical Care

Adrienne Wiest – Nurse, 4 South

Crystal Wheelon – Nurse, University Surgical Oncology

Andrea Whisnat – Nursing Informatics Analyst

Cindy White – Housekeeping

Tiffany Wilhoit – Nurse Specialist

Marshall Williams – Emergency Room

Administrative Assistant

Henrietta Williamson – Nursing Unit Assistant, Surgery

Susan Wilson – Nursing Supervisor

Jill Wiseman – Nurse, 12 East

Sheri Workman – CNA, 12 East

John Young – Nurse, 3 East

Cherys Zimmerman – Coordinator, Hemophilia Center

Niki Zite, MD, MPH – Obstetrics and Gynecology

# Lights of Love

## A Holiday Tradition Begins

The 2008 holiday season marked the first annual Lights of Love program, a year-round program providing a special way to honor or remember a loved one; to recognize a holiday or other special event; to say "thank you" for medical care received at the hospital; or to give special holiday gift.

On November 20, the magnolia trees adorning the University of Tennessee Medical Center's east entrance were elegantly lit with hundreds of white holiday lights, each representing a heartfelt tribute to someone special. This year's Lights of Love program helped raised more than \$3,900 for the pastoral care program at the medical center, a program which helps patients and families during times of hardship through emotional and spiritual guidance.

Lights of Love runs year round and individuals can participate by giving a light to be placed on the Lights of Love tree which will be lit again in November 2009. Lights can be given for a minimum donation of \$15.

If you would like to donate a light, contact the Development Office at 865-305-6611 or [development@utmck.edu](mailto:development@utmck.edu).

## Thanks...

The University of Tennessee Medical Center extends our sincere appreciation to **Smoky Mountain Knife Works President Kevin Pipes** for the creation of the **Support the Cause** pocketknives. As of January 2009, the program has raised more than \$78,000 in support for the prostate and breast cancer outreach and screening programs of the Cancer Institute at the University of Tennessee Medical Center. We greatly appreciate the compassionate support given by Mr. Pipes and the Smoky Mountain Knife Works employees. Support the Cause pocketknives are still available for purchase. For more information and availability, please contact the Development Office, 865-305-6611 or [development@utmck.edu](mailto:development@utmck.edu).



## Coach Pearl Hosts Cancer Institute Fundraiser

Thank you to Vol's Basketball coach, **Bruce Pearl** and **Braden's Furniture** who recently hosted a benefit event for the Cancer Institute at Coach Pearl's new home. The event was fun-filled and successfully raised more than \$25,000 to support prevention, outreach, and screening programs at the Cancer Institute.

## OUTLIVE

Tennessee fans throughout the nation showed their support for the UT Men's Basketball team and the Cancer Institute through purchasing an **OUTLIVE** t-shirt. To date, more than 12,000 t-shirts have been sold, raising over \$85,000 to benefit the Cancer Institute's patient care, education, and research efforts. **OUTLIVE** fosters the Volunteer spirit of neighborly compassion and care to all cancer patients, survivors, and families throughout East Tennessee.

## Medical Center and Graduate School of Medicine Employees Turn Up the Heat in the Torch Campaign

*The Torch Campaign – Employees Care*, the medical center's and graduate school of medicine's employee fund-raising campaign, had its most successful year ever in 2008. With 72 percent of employee participation, they surpassed their goal of \$210,000 by raising more than \$229,600.

"I am so proud of our employees," says Brian Wood, Torch Campaign co-chair, "With so many employees participating, they are truly an inspiration to others and a fine example of why the University of Tennessee Medical Center and UT Graduate School of Medicine are so special. This is a demonstration not only of their commitment to the organization, but, more importantly, to the patients who entrust their well being to us."

This employee-focused fund-raising campaign provides an opportunity for employees to support gift funds benefiting patient care, education, and research at the University of Tennessee Medical Center and UT Graduate School of Medicine. The campaign embodies the pioneering spirit of the medical center and graduate school of medicine to expand and ensure our long-standing tradition of excellence in healthcare.

## By the Numbers...

- Total raised: **\$229,616**
- Total raised in 2007: **\$206,481**
- Employees participating: **72%**
- Average gift: **\$212**

## Total raised:

UT Graduate School of Medicine:  
**\$20,812**

University of Tennessee Medical Center:  
**\$208,804**



# An Evening In *Orange*

## An Evening in Orange Presents

### *"A Starlight Ball"*

Continuing in the tradition of success, the University of Tennessee Medical Center and UT Graduate School of Medicine hosted the second annual An Evening in Orange gala and benefit auction on November 22, 2008 at the Cherokee Country Club in Knoxville. An Evening in Orange raised more than \$300,000 in support for this year's beneficiary, the Brain and Spine Institute.

An Evening in Orange was fortunate to be supported by many businesses, individuals, and families from our community. Their donations of time, financial support, and auction items were all vital to the success of the event and have established An Evening in Orange as the premier black-tie event in Knoxville. Thank you to our An Evening in Orange co-chairs, Leslie Klein and Kim Reid, all the An Evening in Orange committee members, our guests, and our sponsors for making this year's gala a night to remember.



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# CME Spring

In 2008, the UT Graduate School of Medicine educated more than 1,000 regional medical professionals in continuing education programs to meet physician re-licensure requirements. Additionally, the school assisted more than 300 emergency medical technicians with required credits in 18 training courses needed to maintain certification in Tennessee.

We look forward to our upcoming spring 2009 courses.

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## April 3 UT Graduate School of Medicine Faculty Development Workshop Teaching

UT Visitors' Center, Knoxville, TN  
*Up to 4.5 AMA and AAPA credits, or .4 CEU will be available.*

UT Graduate School of Medicine's Academy of Scholars Committee offers Graduate School of Medicine faculty and volunteer faculty a Faculty Development Workshop to be held at the UT Visitors' Center. This workshop, focused on teaching, will welcome guest speakers, Patrick Alguire, MD, American College of Physicians; and Martin Eason, MD, James H. Quillen College of Medicine. Workshop topics will include *Teaching in the Office; Teaching with Simulation; Giving Feedback; The Challenging Student; Teaching in the OR; and Bedside Teaching.*

## April 14 Series: Department of Internal Medicine Grand Rounds: Sickle Cell, Part 2

Steven Wolff, MD - Department of Medicine - Meharry Medical College  
8-9 a.m., Morrison's Conference Center, University of Tennessee Medical Center, Knoxville, TN  
*Up to 1 AMA and AAPA credits or .1 CEU will be available per session.*

Internal medicine physicians must have access to the most recent information on medications, procedures, and new diseases on the horizon. These CME-certified monthly sessions for physicians include a variety of timely topics with speakers who are experts in their fields.

**Upcoming:**  
**May 12**  
**NASH Non-Alcoholic Steatohepatitis,**  
**Tom Young, MD, UT Graduate School of Medicine**

## April 20 Grand Round Series: Neurology/Neurosurgery Quarterly Case Conference: Traumatic Brain Injury

7-8 a.m., Morrison's Conference Center, University of Tennessee Medical Center, Knoxville, TN  
*Up to 1 AMA and AAPA credits or .1 CEU will be available per session.*

The University of Tennessee Medical Center Brain and Spine Institute highlights case presentations and current evidence-based practice. The CME-certified sessions are jointly sponsored by the Brain and Spine Institute and UT Graduate School of Medicine and are intended for physicians.

## April 29 John E. Sullivan, DDS Endowed Lecture Series: Growth Factor Use in Surgical Techniques and Technology Driven Treatment in Dental Implant Techniques.

Wood Auditorium, University of Tennessee Medical Center, Knoxville, TN  
*Up to 4 AGD and AAPA credits or .4 CEU will be available.*

This year's lecture focuses on rhBMP-2 growth factor and the use of technology in oral surgery. Alan S. Herford, DDS, MD, chair and program director of the Department of Oral and Maxillofacial Surgery, Loma Linda University School of Dentistry, will speak about reconstructive surgery, particularly with regard to rhBMP-2/ACS. Stanley Rye, DDS, an Atlanta prosthodontist, will discuss dental implant restorations. This lecture will be of particular interest to dentists, oral surgeons, prosthodontists, and others working in the fields of reconstructive surgery and dental implants.



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